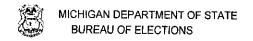


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statemen	t covers From: 08/26/08 to 10/19/08	
1. Committee I.D. Number	4. Candidate La		_
137479	York	Darrin	
2. Committee Name	1	Including District # or Community Served (If applicable)	
CTE Darrin York	Harriso	n Township Treasurer	
	4b. County of Re	sidence	
5. Committee's Mailing Address	6. Treasurer's Na	nme & Residential Address	
38964 Northpointe Pkwy	Maryjean Y		
Harrison Twp. Mi. 48045		hpointe Pkwy	
	Harrison IV	vp. Mi 48045	
Area Code and Phone (586) 465-6004	1		
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may			
be sent to this address by the filing official.	Area Code & Pho	ne	
7. Treasurer's Business Address	8. Designated Reco	ecord keeper's Name and Mailing Address (If the committee has any	
Area Code and Phone	Area Code and F	hone	
9. TYPE OF STATEMENT			
9a. ✓ Pre-Election OR 9b. Post	-Election	9c. Annual Statement (Coverage Year)	
Pre-Election or Post-Election Statement relates to:		9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)	
Primary Gen	eral	9e. Dissolution of Candidate Committee	
Convention	ool	Effective Date of Dissolution	
Special			
Special Cauc	cus	By checking this item, INVe certify that the committee has no assets or	
Date of Election, Convention or Caucus		outstanding debts, including late filling fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for	
11/04/08		the Reporting Waiver. Note: The disposition of residual funds must be reported on Schedule	
	·	1B and the Summary Page.	
A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-kind contributions, loans, exper	quired Campaign S nditures, and outsta	tatements. The Campaign Statements must include all applicable inding debts count against the \$1,000 Reporting Walver threshold.	
If any of the information listed in items 2, 4, 5, 6, 7, or 8 has change amendment to the Statement of Organization should accompany to before the filling deadline of a required campaign statement, the	ed since the information of the compaign State at campaign state	ation was shown on the committee's Statement of Organization, an ment. If a request for a Reporting Waiver is not received on or ment cannot be waived.	
 Verification: I\We certify that all reasonable diligence was used i my\our knowledge and belief the contents are true, accurate and co 	n the preparation o	f this statement and attached schedules (if any) and to the best of	_
Current Treasurer or Maryjean York	YM	10-24-08	i
Designated Record keeper Type or Print Name	Signatura	Date 10-24-08	
Candidate Darrin York	C	Date 10-24-08	
Type or Print Name	Signature		

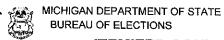


1. Committee I.D. Number 137479

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name CTE Darrin York

RECEIPTS 3. Contributions	Column I This Period	Column II Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 7 78.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$478.00	(18.) \$ \$1,7 37.10
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$178.00	(20.) \$ \$1,337.10
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$7 78.00	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _\$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$7 78.00	(23.) \$ \$1,737.10
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$ 0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10.) \$ \$0.00	\$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$ \$0.00
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$5,918.36	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ \$1,870.57	_
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5. Total Contributions 8. Other Receives)	(14.) + \$ \$778. 00	_
(Line 5, Total Contributions & Other Receipts)	(15.) = \$_\$2 6 48.57	_
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$ \$78.00	_
(Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$1,870.57	_*



ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

1. Committee I.D. Number 137479

CANDIDATE COMMITTEE 2. Committee Name _	(1/E Derna Tork
Enter contributor's name and address. If contribution is from an individual, enter last name, first name middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	e, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 0-15-07	
Darrin Pork 38964 Northponte Pkns.	\$478° \$1437 10
The p, m. 48045 5. If over \$100.00 cumulative, please provide:	\$ 1 10
Occupation Trecsurer Employer Harrison Two	Click Here for Memo Itemization
Business Address	_
Type of Contribution: Direct Loan from a person Fund Raiser	
Contribution #2 PAC Receipt? YES 4. Date of Receipt	
Name & Address	_
	¢ .
	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
S. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name & Address:	
	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
OccupationEmployer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
. Contribution # 4 PAC Receipt? YES 4. Date of Receipt	_
	œ.
	\$
i. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	_
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subto	otal (1) R oo

Grand Total of All Schedules 1A (Complete on last page of Schedule)

Enter this total on

line 3a of Summary Page.



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

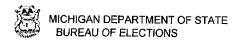
1. Committee I. D. Number 137479

2. Committee Name CTE Describer York

	Committee Ivaine		· -
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		=====	
Name Directi Mailers		10-15-08	\$ 478 @
2230 Elliott Troy, M: 480 84	Purpose: Moil Lit.	Date	· · · · · · · · · · · · · · · · · · ·
T ~ 12034	Click	Here for Memo	Itemization Type
1009,119 40004	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name CTE Town Forlins			\$ 3000
Address	Purpose: Met the Condidate	Date	
	Click t	Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name			
Address	Purpose:	Date	\$
	Click F	Here for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	Statement		
Name			
Tallic			
Addison		Date	\$
Address	Purpose:	24,0	
	Click H	lere for Memo II	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			·············
Name			
Hamo			
Address	Purpose:	Date	\$
	Click H	Here for Memo It	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	4780
	Grand Total of all S (Complete on last page	T .	
	(Somplete on last page		

Enter this total on line 8a of Summary Page

Page of



DEBTS AND OBLIGATIONS SCHEDULE 1E

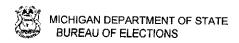
1. Committee I.D. Nur	mber 137479	ገ	 ,-
2. Committee Name	CTE Derrin	York	

CANDIDATE COMMITTEE		(0)		
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com (Che	nmittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> urpose checked.)	or forgiven <u>by</u> the cor	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: Derrin York 38964 N. Porrie Harnson Trp. Mi	4. Type: Loo N 5. Date Debt Was Incurred: 7-77.04 6. Original Amount of Debt: 5 6 6	\$	\$	\$ 6 C
Debt #2 Corp? Yes		An	nount Endorsed: \$	
Owed to or by: Torin York 38964 N. Porrle Harrison Tho. Po. CROUTS	4. Type: LOGN 5. Date Debt Was Incurred: \O_1\sum_0\cdot\sum_0 6. Original Amount of Debt: \$ 200	\$ \$ \$ \$	\$	\$ 200 ED FORGIVEN
If bank loan, name of endorser or guarantor: Debt #3		A	mount Endorsed: \$	
Owed to or by: Darin York 38964 N. Powle Herrison Trp. M.	4. Type: Local 5. Date Debt Was Incurred: 8. 25 - 04) 6. Original Amount of Debt: \$ 37.5	\$ \$ \$ \$	\$	\$ 375 FORGIVEN
If bank loan, name of endorser or guarantor:		A	.mount Endorsed: \$_	
		Page Subtota	l (Outstanding debt)	1191
(Co	omplete on last page of Schedule s	Grand Total howing amounts owed by	of all Schedules 1E or to the committee)	Enter this total

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

on line 12a "owed by"" or line 12b "owed to" of the Summary Page

Page 1 of 3



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

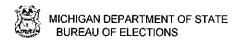
CTE Dorow York CANDIDATE COMMITTEE This Schedule itemizes: Debts and obligations owed by or forgiven the committee b. Debts and obligations owed to or forgiven by the committee. OR (Check either a or b. Use only for the purpose checked.) 3. Name and Mailing Address of person, vendor or 4. Type of Obligation 7. Date and amount of 8. Cumulative 9. Outstanding financial institution to whom debt is owed. (Description) payment to each payment Balance at close Indicate date debt was date on debt of this period Check box to indicate whether debt is owed to an incurred (Item 6 minus incorporated business. If debt is a bank loan, please 6. Indicate original amount Item 8) provide information regarding the endorsers or of debt guarantors, if any. Debt #1 Corp? 4. Type Ocal Owed to or by: Doron York 38964 N. Poste 5. Date Debt Was Incurred: 6-24-04 Harrison Tre, Mi 6. Original Amount of Debt: CIRUSIS 7≲ంం^{_బ్ర} FORGIVEN If bank loan, name of endorser or guarantor: Amount Endorsed: \$ 4. Type Local Owed to or by: Dorrin York 38964 N. Ponte 5. Date Debt Was Incurred: 7-19-04 Herrison The ME 6. Original Amount of Debt: LROYS FORGIVEN If bank loan, name of endorser or guarantor: Amount Endorsed: \$-Debt #3 4. Type: (04) Owed to or by: Doron York 38964 N. Pointe 5. <u>Date Debt Was Incurred</u>: 2-20-04 I terrison Tap, mis 6. Original Amount of Debt: L12045 **FORGIVEN** If bank loan, name of endorser or guarantor: Amount Endorsed: \$ Page Subtotal (Outstanding debt) Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page

4481

Page 2 of 3



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number 137479

CANDIDATE COMMITTEE 2. C	ommittee Name <u> </u>	Jann Jock		
This Schedule itemizes:				
Debts and obligations owed <u>by</u> or forgiven the com (Che	mittee OR b. Debtsck either a or b. Use only for the pu	s and obligations owed <u>to</u> irpose checked.)	or forgiven by the cor	nmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type Loca	\$		
D. Tork	5. Date Debt Was Incurred:	\$	_	
38964 N. Pointe	7-17-08	\$		95910
Harrison Trp. M.	6. Original Amount of Debt	\$	\$	\$ 1 3 1
118045	\$ 959.10	-	-	FORGIVEN
If hank loop, name of andersor or averanter.	,	\$	- '	'
If bank loan, name of endorser or guarantor:	7	Ar	mount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: <u>Locn</u>	<u> </u>		
Donn-Yak	5. <u>Date Debt Was Incurred</u> :	\$		
2896/ N. Vointe	10-15-67	\$, 478 co
Harrison Tre, Mi	6. <u>Original Amount of Debt</u> :	\$	\$	1 \$ 9 70
42048	\$ 9 / 0			FORGIVEN
, ,		\$		
If bank loan, name of endorser or guarantor:	· · · · · · · · · · · · · · · · · · ·		Amount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Typel	\$		
Durn York	5. <u>Date Debt Was Incurred</u> :	<u> </u>	_	
34964 N. Ponte	10-15-08	\$		3000
Harrison Trp, Mis	6. <u>Original Amount of Debt:</u>	 \$	I \$	\$
Horrisos 12 17 18048	\$ 300°			FORGIVEN
, ,		<u> </u>		
If bank loan, name of endorser or guarantor:			Amount Endorsed: \$_	
		Page Subtot	al (Outstanding debt)	19137-10
(C	omplete on last page of Schedule s	Grand Tota showing amounts owed by	al of all Schedules 1E or to the committee)	63 18 36
(0			,	Entor this total

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

on line 12a "owed by"" or line 12b "owed to" of the Summary Page